FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

	Frices of Athanason &							
Principal Place of Business Mailing Address						((50)(00) (10 (#1)(D)#1) 00()) 41(0) 91(1) #1)(11881 16181 81118 83	110 1161 1061
1230 66TH STREET NORTH 1230 66TH STREET NORT ST. PETERSBURG FL 33710 ST. PETERSBURG FL 337						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						04/14/1994		
2. Principal P	ace of Business	28. Mailing Address				4. FEI Number		pplied For
21 5	ame as above	26 Sand as above			noz.	59-3244274		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		Additional equired
City & Stat	A	City & State				a Floation Compaign Financing		
3		28				6. Election Campaign Financing Trust Fund Contribution	UU.C¢	May Be to Fees
Zip	Country	7 _(p)	Co	untry	;	8. This corporation owes or has paid the		
4	25	29	30	Í		Personal Property Tax due June 30.		∏ No
	g. Name and Address of Curren	Registered Agent				10. Name and Address of New Register	ed Agent	
AT	HANASON, NICHOLAS M.			81	Name	Land		
1230-66TH STREET NORTH ST. PETERSBURG FL 33710				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
				Ĺ		,		
				83				
				84	Čity		. 85 Zip	Code
					- 7	F	FL { 1	
office or agent if a						rporation submits this statement for the purpos ation's board of directors. I hereby accept the		registered
12.	Signature typed or printed name of registered ages OFFICERS AND		(NOTE: Hogister	ed Age	ent signatura red	pulred when reinstaling) DAT ADDITIONS/CHANGES TO OFFICERS A		20 IN 12
TITLE	DPT	DELETE	1.13	THE		ADDITIONS/CHANGES TO OTTICERS A	Change	Addition
NAME	ATHANASON, NICHOLAS M			1.2 NAME				
STREET ADDRESS	1230 66TH STREET NORTH				ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33710			CITY - S				
TITLE	DVS	DELETE		2.1 TITLE			Change	Addition
NAME	ATHANASON, MILLICENT B		2.21	2.2 NAME				
STREET ADDRESS	1230 66TH STREET NORTH		235	TREET	ADDRESS		-	
CITY-ST-ZIP	ST. PETERSBURG FL 33710		2.4	2.4 CITY-ST-ZIP				
TITLE		DELETE	3.1 1	ITLE			Change	Addition
NAME			3.21	NAME	1		!	
STREET ADDRESS			3.3 \$	TREET	ADDRESS			
CITY+ST-ZIP			3.4	CITY-5	ST-ZIP			
TITLE		DELETE	4.1 1	ITLE			☐ Change	Addition
NAME			4. 2	NAME				
STREET ADDRESS			4.3 \$	STREET	ADDRESS			
CITY-ST-ZIP					ST - ZIP			
TeTi F		DELETE	511	TITLE	1		Change	Addition

14. Thoreby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 if Changed, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5 3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

Addition

Feb 12 1998 8:00am

Secretary of State